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Pets or meds: how to tackle misery in a paediatric intensive care unit

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Sir: Rates of mood disorder and delirium in patients admitted to an intensive care unit are high and associated with a poor prognosis, as evidenced by longer hospital stay, poorer functional and cognitive outcomes and higher mortality rates after discharge from hospital. Among the adult population, the incidence is particularly high in geriatric patients [1]. In paediatric patients, similarly high rates of psychiatric disorder, mainly mood disorder and delirium, are observed, with reported rates of 5–40% [2, 3]. Targeted pharmacological interventions may be used for primary and secondary prevention, but a common-sense population approach towards prevention in the form of extensive psychosocial interventions may be more productive, particularly in high-risk paediatric intensive care unit (PICU) settings [3–5]. Thus, parents' presence and comfort throughout the day (and night), familiar music, favourite toys, pictures, lighting schedules and sometimes even fragrances may be used productively in all admitted patients.

One of our patients, a 12-year-old girl, became less talkative, displayed a sad facial expression, and lost interest in the surrounding environment. She was known with spina bifida,

Arnold Chiari type II malformation, and central hypoventilation during sleep. She was hospitalized because she required non-invasive ventilation during the night, and for a plastic surgery procedure. As she clearly developed an adjustment disorder with depressed mood, an intensification of the routine psychosocial protocol was attempted – guided by the words of colleague David Mrazek: “During the prolonged hospitalization of young children, the single most important aspect of treatment is to ensure that the primary attachment figures are

available...” [6] – by allowing her friend Orka to visit her daily (Fig. 1). Orka was the patient's assistance dog, permanently placed in her home to provide therapeutic benefits. After the change in the psychosocial protocol allowing for the canine company, the patient did very well during her stay on the PICU, became cheerful and started talking and making jokes again to the nurses and doctors, and did not need any further treatment. There were no complications due to Orka's visits; in particular, no infections arose.



Fig. 1 Published with written permission of the patient and her parents. The patient gave written permission on behalf of Orka, who agreed with: 🐾

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